

S:gte 12/01/05 4239-67020-02 452698.doc E-037-2003/I-US-02

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Finkel *et al.*

Application No. 10/534,626

Filed: May 11, 2005

Confirmation No. 8541

For: METHOD FOR DIAGNOSIS AND
TREATMENT OF VASCULAR DISEASE

Examiner: Not yet assigned

Art Unit: 1616

Attorney Reference No. 4239-67020-02

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: MAIL STOP AMENDMENT, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450 on the date shown below.

Agent
for Applicant(s)

Date Mailed December 1, 2005

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT
PURSUANT TO 37 C.F.R. § 1.97(b)(3)**

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P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language documents. Applicants respectfully request that these documents be listed as references cited on the issued patent.


Applicants filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS. However, if the Patent Office determines that a fee is required for Applicants to file this IDS, authorization to charge any such fees to Deposit Account No. 02-4550 is provided on the accompanying transmittal letter.

The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

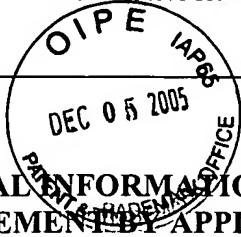
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By



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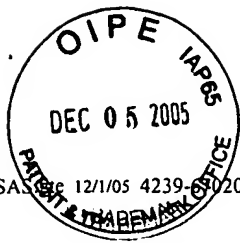


**SUPPLEMENTAL INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

Attorney Docket Number	4239-67020-02
Application Number	10/534,626
Filing Date	May 11, 2005
First Named Inventor	Finkel
Art Unit	1616
Examiner Name	Not yet assigned

Examiner's Initials*	Cite No. (optional)	OTHER DOCUMENTS
		DIMRI <i>et al.</i> , "A biomarker that identifies senescent human-cells in culture and in aging skin in-vivo," <i>Proc.Natl. Acad Sci.U.S.A.</i> 92:9363-9367, 1995
		GEIGER, "The aging of lympho-hematopoietic stem cells," <i>Nature Immunology</i> 3:329-333, 2002
		ITO <i>et al.</i> , "Endothelial progenitor cells as putative targets for angiostatin," <i>Cancer Res</i> 59:5875-5877, 1999
		KAUSHAL <i>et al.</i> , "Functional small-diameter neovessels created using endothelial progenitor cells expanded ex vivo," <i>Nature Med</i> 7:1035-1040, 2001
		LIN <i>et al.</i> , "Origins of circulating endothelial cells and endothelial outgrowth from blood," <i>J Clin Invest</i> 105:71-77, 2000
		PEICHEV <i>et al.</i> , "Expression of VEGFR-2 and AC133 by circulating human CD34(+) cells identifies a population of functional endothelial precursors," <i>Blood</i> 95:952-958, 2000
		REYES <i>et al.</i> , "Origin of endothelial progenitors in human postnatal bone marrow," <i>J Clin Invest</i> 109:337-346, 2002
		TAKAHASHI <i>et al.</i> , "Ischemia- and cytokine-induced mobilization of bone marrow-derived endothelial progenitor cells for neovascularization," <i>Nat Med</i> 5:434-438, 1999
		WALTER <i>et al.</i> , "Statin therapy accelerates reendothelialization. A novel effect involving mobilization and incorporation of bone marrow-derived endothelial progenitor cells," <i>Circulation</i> 3017-3024, 2002
		WERNER <i>et al.</i> , "Circulating Endothelial Progenitor Cells and Cardiovascular Outcomes," <i>N Engl J Med</i> 353:999-1007, 2005

EXAMINER SIGNATURE:	DATE CONSIDERED:
<p>* Examiner: Initial if reference considered, whether or not in conformance with MPEP 609. Draw line through cite if not in conformance and not considered. Include copy of this form with next communication to applicant.</p>	



SAS 12/1/05 4239-67020-02 452699.doc E-037-2003/1-US-02

1616-TRW

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Agent
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Date Mailed December 1, 2005

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TRANSMITTAL LETTER

Enclosed for filing in the application referenced above are the following:

- ☒ Supplemental Information Disclosure Statement
- ☒ Form 1449 and copies of references cited thereon (10)
- ☒ The Director is hereby authorized to charge any additional fees that may be required, or credit over-payment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- ☒ Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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